



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

MISSOURI ORGAN DONOR REGISTRY ENROLLMENT APPLICATION



The **Missouri Organ Donor Registry** is a confidential list of potential organ, tissue and eye donors **maintained by the Missouri Department of Health and Senior Services.**

Would you like to be an organ, tissue and eye donor? Signing up with the Missouri Organ Donor Registry is one way to do this. Upon your death, your family will be asked if you wanted to be a donor. Healthcare staff can check the registry and let your family know if you had signed up. Registry information is an easy way to let your family know your wishes.

You are not required to be on the registry to be a donor. Talking about your wishes with your loved ones is the best way to assure your family knows what to do. However, signing up for the registry will also help because you have put it in writing. Give your family the gift of knowing your wishes. Please consider joining the registry and talk with your family today.

For more information – Call the Missouri Organ Donor Program toll-free – 888-497-4564

Complete the information below to be added to or removed from the Missouri Organ Donor Registry.

PARTICIPANT'S NAME (LAST) (FIRST) (MIDDLE) (SUFFIX)

ADDRESS (STREET) (CITY) (STATE) (ZIP CODE)

Missouri

COUNTY OF RESIDENCE

GENDER

☐ Male ☐ Female

DATE OF BIRTH

SOCIAL SECURITY NO. or DRIVER'S LICENSE NO.

____ / ____ / ____
MONTH DAY YEAR

Do you want your name included in the Missouri Organ Donor Registry?

☐ **YES**, I want my name and information included in the Missouri Organ Donor Registry.

☐ **NO**, Please remove my name and information from the Missouri Organ Donor Registry.

PARTICIPANT'S SIGNATURE

DATE



WITNESS (Required)

DATE

If under the age of 18, a parent / guardian must sign as witness.

Fax or mail completed form to:

Missouri Organ Donor Program
Missouri Department of Health and Senior Services
PO Box 570
Jefferson City, MO 65102-0570

Phone (toll-free) 888-497-4564
or Fax 573-522-2899

A letter of confirmation will be mailed to you within 30 days of receipt in the Missouri Organ Donor Program.